

**UTILITY PATENT APPLICATION  
TRANSMITTAL UNDER 37 CFR 1.53(b)**

**ATTORNEY DOCKET 84594MSS  
Customer No. 01333**

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA. 22313-1450

**Express Mail Label No.**

**EV293512209US**

**Date:** July 29, 2003



**A METHOD OF MAKING A MATERIAL**

**First Named Inventor (or Application Identifier):**

Joanne S. Hunt, et al

Enclosed are:

- |   |   |
|---|---|
| <p>1. <input checked="" type="checkbox"/> Specification</p> <p>2. <input type="checkbox"/> Sheet(s) of drawing(s)</p> <p>3. <input checked="" type="checkbox"/> Information Disclosure Statement Under 37 CFR 1.97.</p> <p>4. Combined Declaration for Patent Application and Power of Attorney:<br/>             4a. <input checked="" type="checkbox"/> New<br/>             4b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)</p> <p>5. <input type="checkbox"/> <u>Incorporation by Reference (useable if Box 4b is checked)</u> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> | <p>6. <input checked="" type="checkbox"/> Assignment of the invention to Eastman Kodak Company</p> <p>7. <input checked="" type="checkbox"/> Certified copy of a priority</p> <p>8. <input type="checkbox"/> Associate Power of Attorney</p> <p>9. <input type="checkbox"/> <u>Deletion of Inventor(s).</u><br/>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> |
|---|---|

10. ☐ If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, after the title, by inserting the following:  
 --CROSS REFERENCE TO RELATED APPLICATION  
 Reference is made to and priority claimed from U.S. Provisional Application Serial No. , filed , entitled .

**If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:**

11. ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: .
12. ☒ Please address all written communications to , Patent Legal Staff,  
 Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.  
 Please Direct all telephone calls to Milton S. Sales at 585-588-2718.

The filing fee has been calculated as shown below:

FOR:	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE				\$ 750
TOTAL CLAIMS	15 - 20 =	-5	x 18 =	\$ 0
INDEPENDENT CLAIMS	1 - 3 =	-2	x 84 =	\$ 0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			+ 280	\$ 0
			<b>TOTAL</b>	<b>\$ 750</b>

- ☒ Please charge my Eastman Kodak Company Deposit Account No. **05-0225** in the amount of **\$ 750**  
**A duplicate copy of this sheet is enclosed**
- ☒ The Commissioner is hereby authorized to charge any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. **05-0225**.  
**A duplicate copy of this sheet is enclosed.**

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